



IFW

CASE LA0108 NP

CERTIFICATE OF MAILING

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JONATHAN N. PROVOOST
Type or print name

Signature

Dec 6, 2004
Date

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF
WASHBURN ET AL.

APPLICATION NO: 10/764,118

FILED: JANUARY 23, 2004

FOR: CYCLOALKYL CONTAINING ANILIDE LIGANDS FOR THE
THYROID RECEPTOR

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

In accordance with 37 C.F.R. §1.56, applicants wish to call the Examiner's attention to the references cited on the attached form(s) PTO-1449.

This reference was cited in a search report in a corresponding PCT International application. Copy of this reference and the search report is enclosed herewith.

The Examiner is requested to consider the foregoing information in relation to this application and indicate that each reference was considered by returning a copy of the initialed PTO 1449 form(s).

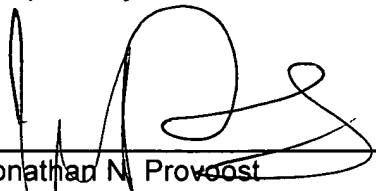


Certificate under 37 C.F.R. §1.97(e)(1)

I, the undersigned attorney, hereby certify that each item of information contained in this Information Disclosure Statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this Statement.

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Respectfully submitted,



Jonathan N. Provoost
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Date: Dec 6, 2004

FORM PTO-1449
(REV. 7-85)

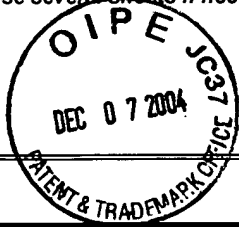
U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

ATTY. DOCKET NO.
LA0108 NP
APPLICATION NO.
10/764,118
APPLICANT
WASHBURN ET AL.
FILING DATE
JANUARY 23, 2004

INFORMATION DISCLOSURE CITATION

(Use several sheets if necessary)

Group



U.S. PATENT DOCUMENTS

EXAMINER INITIAL	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE
AA	6,090,854	7/18/00	James R. Epperson			
AB						
AC						
AD						
AE						
AF						
AG						
AH						
AI						
AJ						
AK						
AL						

FOREIGN PATENT DOCUMENTS

	DOCUMENT NUMBER	DATE	OFFICE	CLASS	SUBCLASS	TRANSLATION	
						YES	NO
AM						<input type="checkbox"/>	<input type="checkbox"/>
AN						<input type="checkbox"/>	<input type="checkbox"/>
AO						<input type="checkbox"/>	<input type="checkbox"/>
AP						<input type="checkbox"/>	<input type="checkbox"/>
AQ						<input type="checkbox"/>	<input type="checkbox"/>

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent pages, Etc.)

AR	
AS	
AT	

EXAMINER

DATE CONSIDERED

*EXAMINER: Initial of reference considered, whether or not citation is in conformance with MPEP 609: Draw a line through citation if not in conformance and not considered. Include a copy of this form with the next communication to applicant.